

MILWAUKEE SOUTH HEALTHCARE CENTER
2730 W RAMSEY AVE

MILWAUKEE 53221 Phone:(414) 282-2600
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 191
Total Licensed Bed Capacity (12/31/04): 191
Number of Residents on 12/31/04: 99

Ownership: Nonprofit Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 111

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		27.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		43.4
Supp. Home Care-Household Services	No	Developmental Disabilities	3.0	Under 65	8.1	More Than 4 Years		29.3
Day Services	No	Mental Illness (Org./Psy)	37.4	65 - 74	14.1			-----
Respite Care	No	Mental Illness (Other)	13.1	75 - 84	39.4			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	32.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.1		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	17.2	65 & Over	91.9	-----		
Transportation	No	Cerebrovascular	9.1		-----	RNs		7.3
Referral Service	No	Diabetes	8.1	Gender	%	LPNs		13.0
Other Services	No	Respiratory	1.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	4.0	Male	28.3	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	71.7			
Provide Day Programming for		100.0	-----		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	9	12.5	144	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	9	9.1
Skilled Care	9	100.0	279	57	79.2	124	0	0.0	0	4	100.0	170	14	100.0	124	0	0.0	0	84	84.8
Intermediate	---	---	---	6	8.3	104	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	6.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		72	100.0		0	0.0		4	100.0		14	100.0		0	0.0		99	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	7.1	Bathing	1.0	64.6	34.3	99
Private Home/With Home Health	0.0	Dressing	4.0	62.6	33.3	99
Other Nursing Homes	6.2	Transferring	20.2	50.5	29.3	99
Acute Care Hospitals	85.8	Toilet Use	14.1	49.5	36.4	99
Psych. Hosp.-MR/DD Facilities	0.0	Eating	29.3	56.6	14.1	99
Rehabilitation Hospitals	0.9	*****				
Other Locations	0.0					
Total Number of Admissions	113	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	10.1		Receiving Respiratory Care	10.1
Private Home/No Home Health	17.1	Occ/Freq. Incontinent of Bladder	58.6		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	14.3	Occ/Freq. Incontinent of Bowel	64.6		Receiving Suctioning	1.0
Other Nursing Homes	12.1				Receiving Ostomy Care	1.0
Acute Care Hospitals	19.3	Mobility			Receiving Tube Feeding	10.1
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	2.0		Receiving Mechanically Altered Diets	36.4
Rehabilitation Hospitals	0.0				Other Resident Characteristics	
Other Locations	5.0	Skin Care			Have Advance Directives	100.0
Deaths	32.1	With Pressure Sores	9.1		Medications	
Total Number of Discharges		With Rashes	3.0		Receiving Psychoactive Drugs	68.7
(Including Deaths)	140					

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	58.1	87.4	0.66	86.5	0.67	87.3	0.67	88.8	0.65
Current Residents from In-County	92.9	86.8	1.07	87.0	1.07	85.8	1.08	77.4	1.20
Admissions from In-County, Still Residing	23.9	21.8	1.10	18.9	1.26	20.1	1.19	19.4	1.23
Admissions/Average Daily Census	101.8	159.1	0.64	188.2	0.54	173.5	0.59	146.5	0.70
Discharges/Average Daily Census	126.1	159.6	0.79	190.4	0.66	174.4	0.72	148.0	0.85
Discharges To Private Residence/Average Daily Census	39.6	63.2	0.63	77.5	0.51	70.3	0.56	66.9	0.59
Residents Receiving Skilled Care	93.9	96.1	0.98	95.9	0.98	95.8	0.98	89.9	1.04
Residents Aged 65 and Older	91.9	96.5	0.95	90.5	1.02	90.7	1.01	87.9	1.05
Title 19 (Medicaid) Funded Residents	72.7	50.4	1.44	56.3	1.29	56.7	1.28	66.1	1.10
Private Pay Funded Residents	4.0	33.2	0.12	22.2	0.18	23.3	0.17	20.6	0.20
Developmentally Disabled Residents	3.0	0.5	5.70	1.1	2.73	0.9	3.49	6.0	0.50
Mentally Ill Residents	50.5	33.9	1.49	29.0	1.74	32.5	1.55	33.6	1.50
General Medical Service Residents	4.0	26.1	0.15	25.4	0.16	24.0	0.17	21.1	0.19
Impaired ADL (Mean)	58.0	51.2	1.13	52.6	1.10	51.7	1.12	49.4	1.17
Psychological Problems	68.7	62.3	1.10	55.4	1.24	56.2	1.22	57.7	1.19
Nursing Care Required (Mean)	8.8	7.1	1.25	7.7	1.16	7.7	1.14	7.4	1.19